

**United States Bankruptcy Court  
61288, Houston TX 77208**

**SOUTHERN DISTRICT OF TEXAS P.O.Box**  
**(Houston Division)**

## PROOF OF CLAIM

Name of Debtors <b>Stage Stores, Inc., a Delaware corporation</b> <input checked="" type="checkbox"/> <b>Specialty Retailers, Inc., a Texas corporation</b> <input type="checkbox"/> <b>Specialty Retailers, Inc. (NV), a Nevada corporation</b> <small>*place an "x" beside the name of the Debtor you are filing a claim against</small>		Case Number 00-35078-H2-11 00-35079-H2-11 00-35080-H2-11	Creditor ID#: 788-60637  United States Bankruptcy Court Southern District of Texas FILED  <b>JUN 30 2000</b>  Michael N. Milby, Clerk
Name of Creditor (The person or other entity to whom the debtor owes money or property):  The Cuero Record		<input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.	
Name and address where notices should be sent:  *****AUTO**3-DIGIT 779 The Cuero Record PO Box 351 Cuero TX 77954-0351  		<input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case  <input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.	
Account or other number by which creditor identifies debtor:  01100040-000		Check here <input type="checkbox"/> replaces if this claim <input type="checkbox"/> amends a previously filed claim, dated: _____	
1. <b>Basis for Claim</b> <input checked="" type="checkbox"/> Goods sold <input type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input type="checkbox"/> Other _____		Retiree benefits as defined in 11 U.S.C. § 1114(a) Wages, salaries, and compensation (Fill out below) Your SS#: _____ Unpaid compensation for services performed from _____ to _____ (date) (date)	
2. <b>Date debt was incurred:</b> 5/3 thru 5/24/2000		3. <b>If court judgment, date obtained:</b>	
4. <b>Total Amount of Claim at Time Case Filed:</b> \$ 801.20 If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below. <input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.			
5. <b>Secured Claim.</b> <input type="checkbox"/> Check this box if your claim is secured by collateral (including a right of setoff).  Brief Description of Collateral: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other All personal and intangible property of Debtor's Estate  Value of Collateral: \$ _____  Amount of arrearage and other charges at time case filed included in secured claim, if any \$ _____		6. <b>Unsecured Priority Claim.</b> <input type="checkbox"/> Check this box if you have an unsecured priority claim Amount entitled to priority \$ _____ Specify the priority of the claim: <input type="checkbox"/> Wages, salaries, or commissions (up to \$4,300),* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3) <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4). <input type="checkbox"/> Up to \$1,950* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6). <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7). <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a-____). *Amounts are subject to adjustment on 4/1/98 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.	
7. <b>Creditor's Statement:</b> I declare under penalty of perjury that the foregoing is true and correct. I declare under penalty of perjury that the foregoing is true and correct. the purpose of making this proof of claim.		This Space Is for Court Use Only	
8. <b>Supporting Documents:</b> Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.			
9. <b>Date-Stamped Copy:</b> To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.			
Date 6/28/00	Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any): Glenn Bea, Publisher		
Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.			



*The Cuero Record*

119 East Main St. • Cuero, Texas 77954  
(361) 275-3464 • Fax (361) 275-3131

117 South Church St. Yorktown, Texas 78164  
(361) 564-2242

**REMIT TO:**

01100040-000  
SPECIALTY RETAILERS, INC.  
BEALLS  
10201 MAIN  
HOUSTON, TX 77025

P.O. Box 351, Cuero, Texas 77954-0351  
- or -  
P.O. Box 398, Yorktown, Texas 78164-0398

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PLEASE RETURN TOP PORTION OF THIS STATEMENT WITH PAYMENT  
TERMS-NET 30 DAYS. ALL PAST DUE CHARGES SUBJECT TO SERVICE CHARGE 1.5% PER MONTH. \$1.00 MINIMUM

DATE	REF.	DESCRIPTION	CHGES	RATE	CHARGES	
05/03-05/09	02	Beginning Balance			1536.95	1536.95
05/07/00		RETAIL/0050854 BKS	30.00	3.85	115.50	1652.45
05/10-05/10	02	PAYMENT CK #643218				778.10
05/17-05/17	02	RETAIL/0050467 BJKLPS	66.00	3.85	254.10	1032.20
		INSERTS			216.00	1248.20
05/21/00		PAYMENT CK #646310				585.60
05/24-05/24	02	RETAIL/0050503 BKS	56.00	3.85	215.60	801.20
BALANCE FORWARD		TOTAL PAYMENTS	ADJUSTED RATE	TOTAL INCHES		
1536.95		-1536.95		152.00		

Due and payable in  
DeWitt County, Texas

PAY AMOUNT  
IN THIS BLOCK